

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))	<b>Attorney Docket No.</b> M4065.0825/P825-A	
	<b>First Inventor</b> Scott P. Campbell	
	<b>Title</b>	<b>COLOR FILTER ARRAY AND MICROLENS ARRAY HAVING OPTICAL ELEMENTS</b>
	<b>Express Mail Label No.</b>	

<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.	<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages <b>19</b> ] (preferred arrangement set forth below) <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>	a. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>5</b> ]	b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper
5. Oath or Declaration [Total Sheets <b>2</b> ] a. <input type="checkbox"/> Newly executed (original or copy)	c. <input type="checkbox"/> Statements verifying identity of above copies
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

<b>ACCOMPANYING APPLICATION PARTS</b>	
9. <input checked="" type="checkbox"/> Copy of Assignment Papers (cover sheet & document(s))	
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee)	<input checked="" type="checkbox"/> Power of Attorney
11. <input type="checkbox"/> English Translation Document (if applicable)	
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
13. <input checked="" type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input type="checkbox"/> Other:	

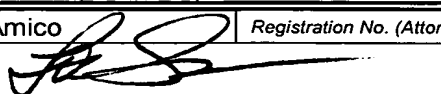
  

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:	
<input checked="" type="checkbox"/> Continuation	<input type="checkbox"/> Divisional
<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No.: 09/990,884
Prior application information: Examiner <b>L. Boutsikaris</b> Art Unit: <b>2872</b>	
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.	

<b>19. CORRESPONDENCE ADDRESS</b>	
<input checked="" type="checkbox"/> Customer Number: <b>24998</b>	<input type="checkbox"/> Correspondence address below
<b>Name</b> DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Thomas J. D'Amico	
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<b>Name (Print/Type)</b> Thomas J. D'Amico	<b>Registration No. (Attorney/Agent)</b> 28,371
<b>Signature</b> 	<b>Date</b> April 1, 2004



13281 U.S. PTO

040104

PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="margin: 0; font-size: small;">Effective 10/01/2003, Patent fees are subject to annual revision.</p>		Complete if Known																																																																																																																																																																																																																																															
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<div style="display: flex; justify-content: space-between; font-size: small;"><div><input type="checkbox"/> Check    <input checked="" type="checkbox"/> Credit Card    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other    <input type="checkbox"/> None</div><div><input checked="" type="checkbox"/> Deposit Account:</div></div> <div style="margin-top: 5px;"><div style="display: flex; justify-content: space-between;"><div style="width: 30%;">Deposit Account Number</div><div style="border: 1px solid black; padding: 2px 10px;">04-1073</div></div><div style="margin-top: 5px;"><div style="display: flex; justify-content: space-between;"><div style="width: 30%;">Deposit Account Name</div><div style="border: 1px solid black; padding: 2px 10px;">Dickstein Shapiro Morin &amp; Oshinsky LLP</div></div></div></div> <div style="margin-top: 5px; font-size: small;">The Director is authorized to: (check all that apply)</div> <div style="display: flex; justify-content: space-between; font-size: small;"><div><input type="checkbox"/> Charge fee(s) indicated below</div><div><input checked="" type="checkbox"/> Credit any overpayments</div></div> <div style="margin-top: 5px; font-size: small;"><input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)</div> <div style="margin-top: 5px; font-size: small;"><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</div>																																																																																																																																																																																																																																																	
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Name (Print/Type)		Thomas J. D'Amico	Registration No. (Attorney/Agent)	28,371	Telephone	(202) 828-2232																																																																																																																																																																																																																																											
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